ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Selan	,	11-121101
O.I.P.E. CLASSIFIER		11/	11/16
FORMALITY REVIEW	CT4	1944	11-28-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

V	Rejected	N	Non-elected
	Allowed	1	!nterference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷	Restricted	0	Objected	
Claim Date	Claim	Date	Claim	Date
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149	99		149	
50 -	100		150	

If more than 150 claims or 10 actions staple additional sheet here

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